

Mail Application to:  
List Coordinator  
Administrative Office  
Probate and Family Court Dept.  
2 Center Plaza, Suite 210  
Boston MA 02108

Application  
to the  
Probate and Family Court Department  
for appointment as  
Discovery Master

For court use only  
Reviewed  
Entered

under

Mass.R.Dom.Rel.P. 26(j)

Name: (Street and Number)

Firm Name: (Street and Number)

Address: (Street and Number)

(City or Town) (State) (Zip Code)

Telephone No. (Area Code) B.B.O. #

E-Mail Address

CATEGORY



I certify that I was admitted to practice before the Supreme Judicial Court on , that I remain in good standing to practice before the courts of the Commonwealth of Massachusetts, and that I have not been convicted of any felony.

I further certify

- that I have at least ten years of experience practicing in the probate field in the Probate and Family Courts of Massachusetts, which has included participating in at least 5 probate trials<sup>†</sup> in which, for at least two days of each trial, witnesses were examined by me and gave testimony on the stand, **or**
- that I have at least ten years of experience practicing in the domestic relations field in the Probate and Family Courts of Massachusetts, which has included participating in at least 5 domestic relations trials\* in which, for at least two days of each trial, witnesses were examined by me and gave testimony on the stand, **and**
- that I have represented a party in at least five cases which included contested discovery issues which were submitted to the judge or to a discovery master, **and**
- that I have the required experience and expertise to serve as a discovery master pursuant to Rule 26(j).

<sup>†</sup>Three of the probate cases in which I represented a party and, on at least two days of each trial, examined witnesses on the stand, are:

DIVISION	DOCKET NUMBER	NAME OF CASE	JUDGE WHO HEARD TRIAL

\*Three of the domestic relations cases in which I represented a party and, on at least two days of each trial, examined witnesses on the stand, are:

DIVISION	DOCKET NUMBER	NAME OF CASE	JUDGE WHO HEARD TRIAL

I have currently in effect professional liability insurance with coverage of \$100,000 or more. The insurance company which issued the policy is:

(Name of Company)

The policy number is: (Policy Number)

The limits of liability are: (Limits of Liability)

I request and I **WILL** accept appointments from the following (not more than **four**) divisions of the Probate and Family Court Department:

- Barnstable Berkshire Bristol Dukes Essex Franklin Hampden
- Hampshire Middlesex Nantucket Norfolk Plymouth Suffolk Worcester

I understand that I will be required each year, after 2001, to complete three hours of continuing legal education in the domestic relations and discovery fields to remain on the list for these appointments. I agree that, if I am appointed as a discovery master and a person with an appearance in the case requests a certificate of my professional liability insurance, I will provide the certificate within seven days of the request. I understand that, to remain on the list, I must mail to the List Coordinator each September, after 2001, a certificate of my good standing with the Board of Bar Overseers dated that September.

I have attached to this Application a **copy of my resume** and a **certificate** of my good standing with the Board of Bar Overseers. The certificate was issued not more than 30 days ago.

I certify under the penalties of perjury that all of the above information is true.

Date: (Signature of Applicant)